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NOV 14 2007

RICHARD W. WIEKNER  
CLERK, U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

E-filing

JF (PR)

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

John Harvey Healy Plaintiff,  
vs.  
Director Calif Dept Corrections,  
San Quentin State Prison  
State of California Defendant.

CV 07 CASE NO. 5790

PRISONER'S APPLICATION TO PROCEED IN FORMA PAUPERIS

I, John H. Healy, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes        No X  
If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: \_\_\_\_\_ Net: \_\_\_\_\_  
Employer: \_\_\_\_\_  
\_\_\_\_\_

1 If the answer is "no," state the date of last employment and the amount of the gross and net  
 2 salary and wages per month which you received. (If you are imprisoned, specify the last  
 3 place of employment prior to imprisonment.)

4 \_\_\_\_\_  
 5 \_\_\_\_\_  
 6 \_\_\_\_\_

7 2. Have you received, within the past twelve (12) months, any money from any of the  
 8 following sources:

- |            |  |  |
|------------|--|--|
| 9       a. | Business, Profession or<br>self employment   | Yes _____ No _____                               |
| 10      b. | Income from stocks, bonds,<br>or royalties?  | Yes _____ No _____                               |
| 11      c. | Rent payments?   | Yes _____ No _____                               |
| 12      d. | Pensions, annuities, or<br>life insurance payments?                                    | Yes _____ No _____                               |
| 13      e. | Federal or State welfare payments,<br>Social Security or other govern-<br>ment source? | Yes <input checked="" type="checkbox"/> No _____ |

14 If the answer is "yes" to any of the above, describe each source of money and state the amount  
 15 received from each.

16 I received a check for funds of \$1.12 a day for a parole violation  
for amount of \$200 from State of Calif.

17 3. Are you married? Yes \_\_\_\_\_ No

18 Spouse's Full Name: \_\_\_\_\_

19 Spouse's Place of Employment: \_\_\_\_\_

20 Spouse's Monthly Salary, Wages or Income:

21 Gross \$ \_\_\_\_\_ Net \$ \_\_\_\_\_

22 4. a. List amount you contribute to your spouse's support: \$ \_\_\_\_\_

1        b. List the persons other than your spouse who are dependent upon you for  
 2           support and indicate how much you contribute toward their support. (NOTE:  
 3           For minor children, list only their initials and ages. DO NOT INCLUDE  
 4           THEIR NAMES.).

5 \_\_\_\_\_  
 6 \_\_\_\_\_

7        5. Do you own or are you buying a home? Yes \_\_\_\_ No

8        Estimated Market Value: \$ \_\_\_\_\_ Amount of Mortgage: \$ \_\_\_\_\_

9        6. Do you own an automobile? Yes \_\_\_\_ No

10      Make \_\_\_\_\_ Year \_\_\_\_\_ Model \_\_\_\_\_

11      Is it financed? Yes \_\_\_\_ No \_\_\_\_ If so, Total due: \$ \_\_\_\_\_

12      Monthly Payment: \$ \_\_\_\_\_

13      7. Do you have a bank account? Yes \_\_\_\_ No  (Do not include account numbers.)

14      Name(s) and address(es) of bank: \_\_\_\_\_  
 15 \_\_\_\_\_

16      Present balance(s): \$ \_\_\_\_\_

17      Do you own any cash? Yes \_\_\_\_ No  Amount: \$ \_\_\_\_\_

18      Do you have any other assets? (If "yes," provide a description of each asset and its estimated  
 19      market value.) Yes  No

20      Clothes I was wearing when arrested.

21      8. What are your monthly expenses?

22      Rent: \$ N/A Utilities: N/A

23      Food: \$ N/A Clothing: N/A

24      Charge Accounts:

<u>Name of Account</u>	<u>Monthly Payment</u>	<u>Total Owed on This Acct.</u>
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26      \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

27      \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

28      \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_ 9. Do

1 you have any other debts? (List current obligations, indicating amounts and to whom they are  
2 payable. Do not include account numbers.)

3 Approx \$1200 to Bally's Fitness Approx \$250 to Sprint Wireless

4 Approx \$700 to Cingular Wireless

5 10. Does the complaint which you are seeking to file raise claims that have been presented  
6 in other lawsuits? Yes        No X

7 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in  
8 which they were filed.

9 N/A

10

11 I consent to prison officials withdrawing from my trust account and paying to the court  
12 the initial partial filing fee and all installment payments required by the court.

13 I declare under the penalty of perjury that the foregoing is true and correct and  
14 understand that a false statement herein may result in the dismissal of my claims.

15

16

11-6-07

17

DATE

John F. Fealy

SIGNATURE OF APPLICANT

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I Sent two  
of these forms in  
the Account Dept. & here  
Xo San Francisco Answer.

Case Number: \_\_\_\_\_

**CERTIFICATE OF FUNDS  
IN  
PRISONER'S ACCOUNT**

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of \_\_\_\_\_ for the last six months at

[prisoner name]

\_\_\_\_\_ where (s)he is confined.

[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ \_\_\_\_\_ and the average balance in the prisoner's account each month for the most recent 6-month period was \$ \_\_\_\_\_.

Dated: \_\_\_\_\_

[Authorized officer of the institution]